

HELPFUL RESOURCES

Houston Department of Health and Human Services
www.houstontx.gov/health/

Advocates for Youth
www.advocatesforyouth.org

Baylor College of Medicine Teen Health Clinic
www.teenhealthclinic.org

Center for Young Women's Sexual Health
www.youngwomenshealth.org

Center for Young Men's Health
www.youngmenshealthsite.org

CDC, National HIV & STD Testing Centers
www.gettested.cdc.gov/stdtesting.aspx

CDC, Sexual Risk Behavior
www.cdc.gov/healthyouth/sexualbehaviors/

Houston Area HIV Services Ryan White Planning Council
www.rwpchouston.org

I Wanna Know!
www.iwannaknow.org/teens/index.html

It's Your (Sex) Life
www.itsyoursexlife.com

GSA Network
www.gsanetwork.org

National Coalition for Sexual Health
www.nationalcoalitionforsexualhealth.org

Office of Adolescent Health
www.hhs.gov/ash/oah

Stay Teen
www.stayteen.org

Teen Source
www.teensource.org

the Montrose Center
<http://www.montrosecenter.org/hub/>

University of Texas Prevention Research Center
<https://sph.uth.edu/tprc/>

U.S Department of Health and Human Services Office of Adolescent Health
<http://www.hhs.gov/ash/oah/adolescent-health-topics/index.html>

GET INVOLVED!^{15, 16}

Youth

- Talk about sexual health topics.
- Choose less risky sexual health behaviors.
- Encourage partners and peers to engage in less risky sexual health behaviors.
- Use condoms consistently and correctly.
- Reduce the number of sexual partners.
- Get tested on a regular basis.

Parents

- Build and support positive youth-adult communication.
- Talk to youth about safe sexual practices.
- Become familiar about current issues impacting youth sexual health.

School Personnel

- Examine and implement evidence-based programs.
- Build and support positive youth-friendly relationships.
- Create a culture of open-discussion and a system of referrals to various providers

Community Organizations

- Provide youth friendly services.
- Provide little to no cost sexual health services to youth.
- Make contraceptives widely available at venues frequented by adolescents, including schools.

References and More!

Please visit <http://www.houstontx.gov/health/hdhhs-profiles> for a full list of references.

Other Titles in this Series:

- Teen Pregnancy & Prevention
- Youth Suicide Prevention
- Youth Mental Health
- Youth Violence Prevention
- Teen Dating Violence Prevention
- Youth Immunizations
- Youth Obesity & Prevention
- Youth Homelessness
- Youth Substance Abuse & Prevention
- Youth Bullying & Prevention
- Overall Summary of Teen Health Issues

For more information, please contact Adolescent Health and Injury Prevention (AHIP) via the Houston Youth Voice, Health, Safety Coalition at: 4youthvoice@houstontx.gov
Facebook: [4youthvoicehouston](https://www.facebook.com/4youthvoicehouston) Twitter: [@4youthvoice](https://twitter.com/4youthvoice)

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YOUTH IN HOUSTON & HARRIS COUNTY¹⁻³

Population*

Houston: 601,918 (29%)
Harris County: 1,263,889 (31%)

Poverty

Children under 18 living below poverty level:
Houston: 35.3%
Harris County: 27.4%

Education

High School Graduates (ages 18-24):
Houston: 29.3%

DEMOGRAPHIC SNAPSHOT OF YOUTH^{4,14}

Below is a snapshot of the demographics for youth living in Houston and Harris County.

Gender

Houston:	Harris County:
Male: 51%	Male: 51%
Female: 49%	Female: 49%

Age

Houston:	Harris County:
Under 5 years: 28%	27%
5 to 9 years: 25%	25%
10 to 14 years: 23%	24%
15 to 19 years: 24%	24%

Race/Ethnicity

Harris County:
Hispanic: 51%
White: 23%
Black: 19%
Other: 7%

* Percentages (youth under the age of 19) are representative of the total Houston/Harris County population.
⁴ As of 2010, percentages are based on total population of Houston and/or Harris County under the age of 19.

YOUTH
voice • health • safety

Adolescent Health and Injury Prevention (AHIP)

SEXUAL HEALTH, STI & HIV

Profile of the City of Houston & Harris County, Texas

Although teenage pregnancy rates have decreased in recent years, the rates of unintended pregnancy and sexually transmitted infections (STIs) among youth in the U.S. remain high compared to other developed nations.⁵ Sexual health, along with other components of youth health, is related to healthy emotional and physical outcomes.

Nearly half of the 20 million STI cases each year were among youth ages 15 to 24 years.⁵

Sexually active youth are at higher risk for acquiring STIs compared to adults due to a combination of behavioral, biological and cultural factors.

National Data:⁶

- **47%** have had sexual intercourse
- **6%** had sexual intercourse before age 13
- **15%** had sexual intercourse with four or more sexual partners
- **59%** used a condom during their last sexual encounter

Texas Data:⁶

- **45.9%** have had sexual intercourse
- **5.2%** had sexual intercourse before age 13
- **14.9%** had sexual intercourse with four or more sexual partners
- **52.9%** used a condom during their last sexual encounter

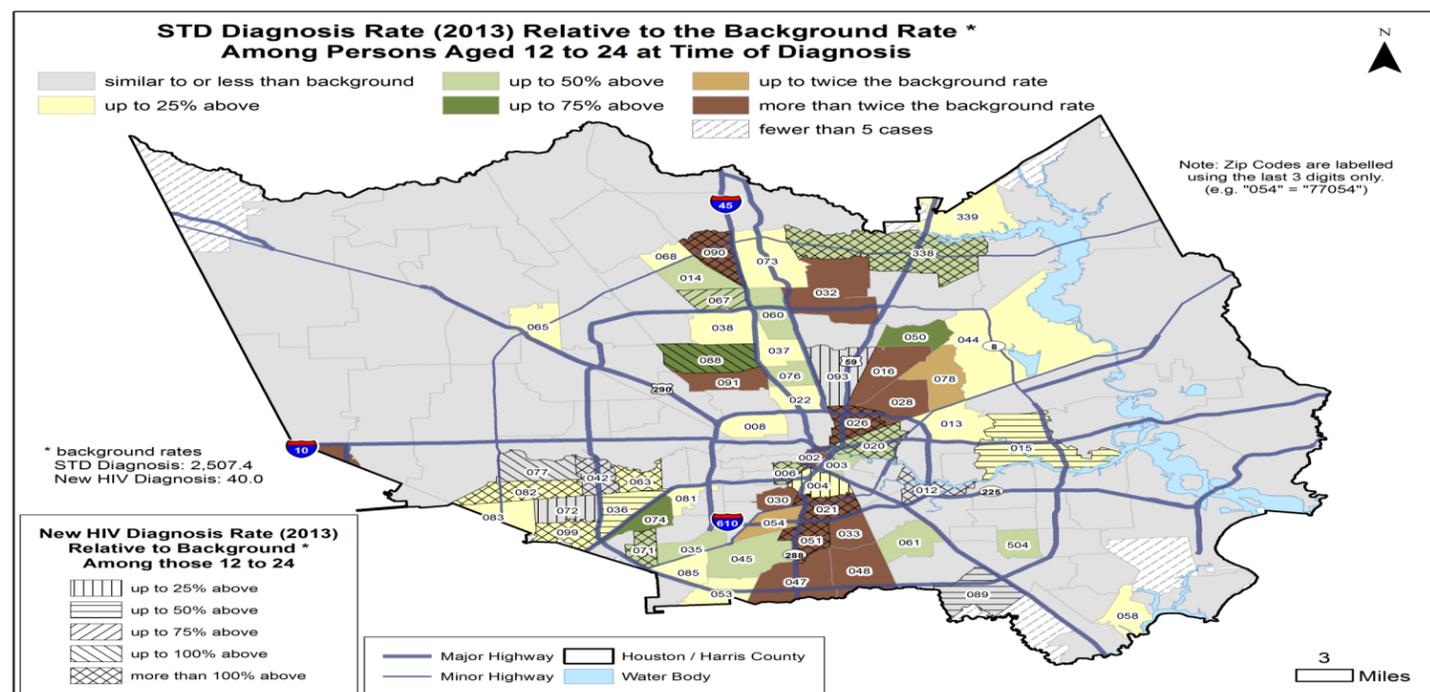
Houston/Harris County Data:⁷

- **47%** have had sexual intercourse
- **8%** had sexual intercourse before age 13
- **15%** had sexual intercourse with four or more sexual partners
- **44%** did not use a condom during their last sexual encounter
- **32%** were never taught in school about AIDS or HIV infection

“Many young people engage in sexual risk behaviors that can result in unintended health outcomes.”⁸

- The Centers for Disease Control and Prevention

SEXUALLY TRANSMITTED DISEASES* IN HOUSTON/HARRIS COUNTY



*STD count includes chlamydia, gonorrhea, and primary and secondary syphilis combined.

ACCESS TO SERVICES ⁹

Health insurance coverage and the ability to pay for services affect teens' access to sexual and reproductive health care.

Federal Title X funding provides confidential contraceptive services and STI screening and treatment for low-income teens.

Currently, Medicaid funds 75% of publicly funded family planning services in the U.S.

21 states and DC have policies that explicitly allow minors to consent to contraceptive services, 25 allow consent in certain circumstances and 4 have no explicit policy.

“Achieving reproductive and sexual health requires more than preventing unwanted pregnancy and sexually transmitted infections. It includes developing the ability to form and maintain meaningful relationships with others and with one’s own body.”

— Susan Wale Schwartz

Between 25 and 33 percent of adolescents forgo needed care and many others lack access.¹⁰

WHAT WORKS?

The programs listed below are a compilation of initiatives, campaigns, and programs that are research informed, apply best practices and have the potential to be implemented in various settings. Below are some examples of these types of programs for sexual health, STIs and HIV.

Program	What Is It?	Website
HORIZONS*	Intervention designed to reduce STDs by improving STD/HIV risk-reduction knowledge.	www.cdc.gov/hiv/prevention/research/compendium/rr/horizons.html
Sisters Saving Sisters*	Provides HIV/STD risk reduction strategies, illustrates correct condom use, and depicts effective condom use via group discussions, videotapes, games, and other interventions.	www.cdc.gov/hiv/prevention/research/compendium/rr/sistersavingsisters.html
Be Proud! Be Responsible! Pre Protective!*	Eight-part curriculum to provide adolescents with the knowledge, motivation, and skills necessary to reduce risky sexual behavior.	recapp.etr.org/recap/index.cfm?fuseaction=pages.ebpDetail&PageID=607
Becoming a Responsible Teen (BART)*	HIV prevention curriculum developed for African American adolescents, that is based on ethnic pride, and can be delivered in a community-based setting.	www.cdc.gov/hiv/prevention/research/compendium/rr/bart.html
It’s Your Game... Keep it Real*	It’s Youth Game... Keep it Real (IYG) is a classroom and computer-based program for middle school youth. The curriculum is grounded in theory and was developed to prevent teen pregnancy and sexually transmitted diseases (STDs).	https://sph.uth.edu/iyg/

*Denotes evidence based program as listed by the Office of Adolescent Health

Recommendations:^{11,12}

- Establish and expand school-based health centers, particularly those that provide comprehensive primary care services.
- Increase funding to provide positive youth development and afterschool programs.
- Encourage contraceptive measures and safe sex practices to be utilized among schools.
- Encourage school health programs, school nurses and physicians to promote increased healthy and responsible sexual behavior.

Related Policies and Policy Implications:^{13,14}

Texas Education Code, Sec. 28.004 states that:

- Local school boards can decide whether or not to teach sexual education.
- If sexual education is taught, abstinence must be covered and stressed as the only completely effective protection against unplanned pregnancy, sexually transmitted diseases, and HIV/AIDS.
- Teaching about contraceptives, such as condoms or birth control, is not required.
- Federally funded abstinence-only programs, including the ones used in Texas, cannot include information about the health benefits of contraception and condoms for sexually active youth and must teach that sex outside of marriage is likely to have harmful physical and psychological effects.